NEW MOORING Application Form

Town of Barrington Waters

Please return this form to: Harbormaster 100 Federal Road Barrington, RI 02806

Phone: (401) 437-3930 Fax: (401) 437-3939

<u>Directions</u>: Complete this form in its entirety. Sign the application and return to the Harbormaster's Office. Providing false or misleading information will result in forfeiture of mooring.

Date	PLEASE PRINT	· -		
Applicant's Name	LAST		FIRST	_{M.I.}
Permanent Residence				
Permanent Residence			TOWN/CITY	ZIP
Mailing Address				
e-mail address	STREET		TOWN/CITY	ZIP
	Bu			
	VESSEL US	ING MOORI	NG	
I currently own a boat to be	moored in Barrington	I plan to	buy a boat of the follow	ving type
Vessel Name		Color	Type: Sail	Power
Total length (incl. bow roller/put	pit/outboard) Dra	ft Hull	ID No	
Documentation/ Registration	#	State Regist	ration #	
Does this vessel have a marin	e head? Yes No	Holding	g Tank? Yes No	
Vessel Owner(s)				
Applicant will be required to will be through a copy of Sta	present proof of vessel o	wnership at th		oring space. This
]	MOORING LOCATION	DESIRED (se	parate form for each lo	cation required)
Harbor Police Cove	pper Barrington River	100 Acre Cove	Smith's Cove	
Barrington Beach Western	Barrington Bullock's	Cove		
Land based access to my boat will b	e from			
(if from private property, enclose a	letter granting permission)			
Once a mooring space is gran	nted, the applicant has 10	days to comp	lete and pay for the spe	cific registration
Applicant is required to noti intended vessel in order to rebeing dropped from the wait	main on the waiting list.			
I certify that all information	provided in this mooring	application is	correct to the best of n	ny knowledge:
Signatura			Data	